



**Office of
Mental Health**

**Office of Addiction
Services and Supports**

OMH Updates for Health Homes Serving Adults

**Nicole Haggerty, LMHC
OMH Bureau Director, Rehab Services and Care
Coordination**

November 20, 2020

Changes in Adult BH HCBS: Removing Barriers to Access and Administrative Burden



Office of
Mental Health

Office of Addiction
Services and Supports

Transition to Community Oriented Recovery and Empowerment (CORE) Services: HARP Enrollees

- OMH and OASAS have submitted an application to CMS to transition the current Adult Behavioral Health Home and Community Based Services to **adult rehabilitation services demonstration** under the 1115 Waiver

- These new services will be called:

Community Oriented Recovery & Empowerment (CORE) Services

- This transition will eliminate many of the barriers to access while preserving the heart of **individualized, community-based rehabilitation** services
- Upon the transition to CORE: **Health Home care managers will continue to provide care management to HARP enrollees**. Workflows related to separate assessments and POCs specific to HCBS will change.
- CORE services continue to be unique to the **HARP** benefit package



Transition of Services: BH HCBS to CORE

BH HCBS	Services Post Transition to CORE
Psychosocial Rehabilitation	Psychosocial Rehabilitation (including PSR with special focus on vocational and educational goals)
Community Psychiatric Support and Treatment	Community Psychiatric Support and Treatment
Empowerment Services – Peer Supports	Empowerment Services – Peer Supports
Family Support and Training	Family Support and Training
Short Term Crisis Respite	Crisis Intervention: will be available to all Medicaid Managed Care recipients
Intensive Crisis Respite	Crisis Intervention: will be available to all Medicaid Managed Care recipients
Education Support Services Pre-Vocational Services Transitional Employment Intensive Supported Employment Ongoing Supported Employment	Consolidated under PSR
Habilitation	Removed: Beneficiary goals and needs more appropriately addressed via PSR
Non-Medical Transportation	Removed

CORE Service Array

Community
Psychiatric Support
and Treatment

Psychosocial
Rehabilitation

Family Support &
Training

Empowerment
Services – Peer
Support

What does this mean for Care Managers?



Office of
Mental Health

Office of Addiction
Services and Supports

Decreasing administrative burden...

Removal of NYS Eligibility Assessment

- Referral to services more like other services (PROS, Clinic, etc.)
- LPHA recommendation may be at provider or referral point

Adult BH HCBS Plan of Care

- Additional federal requirements for HCBS do not apply under new CORE

Conflict Free Care Management

- Choice of providers is always good practice
- Supervisory restrictions for Assessor and CORE provider removed
- Additional workflow steps including Level of Service Determination (LOSD) and POC approval removed

Health Home Care Manager Role

- Remains a **critical referral source** for CORE services
- Continue to provide comprehensive, integrated care management
- CORE referrals will remain a part of Health Home performance standards – focus on linkage to services, not assessments
- NYS Eligibility Assessment and additional Adult BH HCBS plan of care requirements likely removed
- Wider array of HARP members eligible if HCBS settings rule is removed

Specialty Care Management



Office of
Mental Health

Office of Addiction
Services and Supports

Specialty Mental Health Care Management

- DOH and OMH are continuing to work toward a formal Designation or Certification of Specialty Care Management Agencies to serve high need SMI members
- Goals:
 - Improve enrollment of high need SMI individuals into HH – via Referral and access points, transitions in care
 - All HH+ eligible members are receiving HH+ level of support
- Direct OMH Oversight of Specialty MH CMAs
- Key priority is to decrease administrative burden on CMs - more time with members
- Use of data to track and evaluate key outcomes meaningful to SMI population (claims, CMART, MAPP, PSYCKES) – e.g., linkage to CORE services

Health Home Plus (HH+)

Ensuring HH+ eligible individuals are receiving HH+

Only designating CMAs who are doing this work

- Have qualified Staff (HARP assessors have same quals)
- Ensure appropriate caseloads; added flexibility
- Face to face, *relationship based work*

Provisional Designation for Agencies who are serving HH+ but not yet structured to do it

- TA and training support from OMH
- Time to “ramp up” to serve the HH+ population

All: Aligning MAPP and PSYCKES, decrease admin burden!



Thank you!



**Office of
Mental Health**

**Office of Addiction
Services and Supports**